Case 17-254		ered 08/25/17 10:18:15 Desc Main
Fill in this information to ident	tify your case:	of 57 FILED
United States Bankruptcy Court	for the:	UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS
Northern District of Illinois		ALIO OF BACK
Case number (#known):	0	AUG 25 2017
Case Hulliber (If known);	Chapter you are filing under:	
	☐ Chapter 11 ☐ Chapter 12	JEFFREY P. ALLSTEADT, CLERK
PRINCE AND ADDRESS OF THE PRINCE AND ADDRESS	Chapter 13	INTAKE 2 Check if this is an
		amended filing
Official Form 101		
	ition for Individuals F	iling for Bankruptey
		narried couple may file a bankruptcy case together—called a
same person must be Debtor 1 i Be as complete and accurate as	n all of the forms.  possible. If two married people are filing togethed and a separate sheet to this form. On the	oth debtors. For example, if a form asks, "Do you own a car," d about the spouses separately, the form uses <i>Debtor 1</i> and eport information as <i>Debtor 1</i> and the other as <i>Debtor 2</i> . The er, both are equally responsible for supplying correct e top of any additional pages, write your name and case number
Tourself	About Debtor 1:	
1. Your full name		About Debtor 2 (Spouse Only in a Joint Case):
Write the name that is on your	THE	
government-issued picture identification (for example,	First name	First name
your driver's license or		<u></u>
passport). Bring your picture	Middle name	Middle name
identification to your meeting	Last name	Last name
with the trustee.	Suffix (Sr., Jr., II, III)	G.F. (O. 1.11)
NESS/24 PROGRESS CONTRACTS		Suffix (Sr., Jr., II, III)
2. All other names you		The control of the co
have used in the last 8	TAERESA First name	First name
years	Middle name	
Include your married or maiden names.	SHAR	Middle name
	Lasuname	Last name
	First name	First name
	Middle name	
	wiede statie	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social Security	xxx - xx - 1 5 2 5	xxx - xx
number or federal	OR	OR
Individual Taxpayer Identification number	9 xx - xx	9 xx - xx
(LTIN)	PROPERTY OF THE PROPERTY OF TH	~ ~
		200 feet and a second contract of the second

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Debtor 1	IHERESSA	JOHNSON	Case number (#inown)
	First Marine Middle A	lame Last Name	
gha-kalenden annan nagung	ki terina, hada yaza di iza saliya sel ayi vali azarki kisabi interiopojih interiozota interiopojih interiozot	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
and Er	isiness names nployer ication Numbers ou have used in	I have not used any business names or E	INs.
the las	t 8 years trade names and	Business name	Business name
	usiness as names	Business name	Business name
		EIN	EIN THE THE PART AND THE PART A
		EN	EIN
Where	you live	and the state of the control of the state of	If Debtor 2 lives at a different address:
		6551 S. TALMAN	Number Street
			ESSID ROOM NOW
		CHICAGO IL	50629
			P Code City State ZIP Cod
		COOK	
		County	County
		If your mailing address is different from the above, fill it in here. Note that the court will sany notices to you at this mailing address.	e one If Debtor 2's mailing address is different from end yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State Zi	P Code City State ZIP Code
Vhy yo	u are choosing	Check one:	стем на при
this district to file for bankruptcy		Over the last 180 days before filing this pet I have lived in this district longer than in an other district.	tion, Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
urt@@intersont vs.com			

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Document

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Debtor 1

<u> ПОЕЙТЕОИ</u>

Case number (#10000)

7.	The chapter of the Bankruptcy Code you	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.								
	are choosing to file	☐ Chapter 7								
	Rugei	☐ Chapter 11 ☐ Chapter 12								
		C Cha	pter 13							
8.	How you will pay the fee	☐ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.								
		Аррі	lication	ay the fee in Installme for Individuals to Pay 1	The Filing	Fee in Installme	ents (Official	Form 103A).		
		By la less pay	w, a ju than 1: the fee	dge may, but is not req 50% of the official pove	uired to, rty line th choose ti	waive your fee, a at applies to you his option, you m	and may do Ir family size nust fill out ti	ou are filing for Chapter so only if your income is a and you are unable to the Application to Have the etition.		
<b>)</b> ,	Have you filed for bankruptcy within the	□ No		NOTHEDNII				12 20020		
	last 8 years?	Yes.	District	NORTHERN IL	When	MM / DD / YYYY	Case number	13-20839		
			District		When	MM / DD / YYYY	Case number	F		
			District		When		Case number	•		
						MM/ DD/YYYY				
0.	Are any bankruptcy cases pending or being	☑ No								
	filed by a spouse who is not filing this case with	☐ Yes.					_ Relationship			
	you, or by a business partner, or by an affiliate?		District		When	MM / DD / YYYY	Case number	r, if known		
			Debtor			······································	Relationship 1	to you		
			District	white drawn	When	MM / DD / YYYY	Case number	, if known		
	***									
1.	Do you rent your residence?	No. Yes.	Go to li Has yo resider	ur landlord obtained an ev	riction judg	ment against you	and do you w	rant to stay in your		
			•	Go to line 12.						
				s. Fill out Initial Statement bankruptcy petition.	About an i	Eviction Judgment	Against You	(Form 101A) and file it with		

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Debtor 1	THERESSA		JOHNSON	Cooks reconhere
	s mor seminal. Dispute V	time	Last Name	Case number (# known)
Part 3:	Report About Any	Busines	ses You Own as a	s Sole Proprietor
of any	ou a sole proprietor / full- or part-time		Go to Part 4.	
busin A cole	ess? proprietorship is a	₩ Yes	. Name and location o	of business
busine: individu	ss you operate as an ual, and is not a		Name of business, if an	ty
separa: a como LLC.	te legal entity such as tration, partnership, or		Number Street	
sole pro	ave more than one pprietorship, use a e sheet and attach it			
to this p			75.	
			City	State ZIP Code
			Check the appropriate	e box to describe your business:
				ness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
			Stockbroker (as di	efined in 11 U.S.C. § 101(53A))
				r (as defined in 11 U.S.C. § 101(6))
	· · · · · · · · · · · · · · · · · · ·	· St. · Ata and an an inches	None of the above	
Chapte Bankru are you debtor For a del business	u filing under r 11 of the ptcy Code and a small business finition of small debtor, see . § 101(51D).	most recamy of the No. 1	ent balance sheet, star ese documents do not am not filing under Ch am filing under Chapt he Bankruptcy Code.	ter 11, but I am NOT a small business debtor according to the definition in
		Yes. i	am filing under Chapti Bankruptcy Code.	ter 11 and I am a small business debtor according to the definition in the
art 4:	eport if You Own o	r Have A	ny Hazardous Proj	perty or Any Property That Needs Immediate Attention
. Do you	own or have any	Z No		
property alleged t	that poses or is to pose a threat	_	What is the hazard?	
of immir				
public h	ealth or safety?			
	u own any that needs			
immedia	te attention?	i	f immediate attention i	is needed, why is it needed?
perishable that must b	le, do you own goods, or livestock e fed, or a building urgent repairs?			
		V	Vhere is the property?	
				Number Street
				City State ZIP Code
				State CIT Code

Debtor 1

THERESSA

**JOHNSON** 

Case number (# known)

Part 5

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will tose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

u	am not	equired	to receive	a	briefina	shoul
	credit co	unseling	because	of		~ DOM:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before i filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before i filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any, if you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am not required to receive a briefing about credit counseling because of:
crean counseling because of:

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making

rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after t reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-25432 Doc 1 Filed 08/25/17 Entered 08/25/17 10:18:15 Desc Main Page 6 of 57 Document

Debtor 1 OHNSON Case number (27 kg) Answer These Questions for Reporting Purposes 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts do as "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. 2 Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filling under Chapter 7. Go to line 18. Chapter 7? Do you estimate that after 🔲 Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? excluded and ☐ No administrative expenses are paid that funds will be Yes available for distribution to unsecured creditors? 18. How many creditors do **2** 1-49 1,000-5,000 you estimate that you 25,001-50,000 **1** 50-99 5.001-10,000 owe? **50,001-100,000** 100-199 10,001-25,000 200-999 ☐ More than 100,000 19. How much do you \$0-\$50,000 \$1,000,001-\$10 million estimate your assets to \$500,000,001-\$1 billion □ \$59,001-\$100,000 \$10,000,001-\$50 million be worth? ☐ \$1,000,000,001-\$10 billion S100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion ☐ \$500,001-\$1 million ☐ \$100,000,001-\$500 million More than \$50 billion 28. How much do you \$0-\$50,000 ☐ \$1,000,001-\$10 million ☐ \$500,000,001-\$1 billion estimate your liabilities \$50,001-\$100,000 \$10,000,001-\$50 million to ba? ☐ \$1,000,000,001-\$10 billion \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million ☐ \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

Official Form 101

18 U.S.C. §§ 152, 1341, 1519, #

Signature of Deptor 2

MM / DD /YYYY

Case 17-25432 Doc 1 Filed 08/25/17 Entered 08/25/17 10:18:15 Desc Main Document Page 7 of 57

Karst Plante				·	
I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.					
	Date				
Signature of Attorney for Debtor		MM	1	DD	/ / / / / / / / / / / / / / / / / / / /
Printed name				·	
Firm name		<del></del>	<del></del> -	<del></del>	
Number Street			<del></del>		
City		· · · · · · · · · · · · · · · · · · ·		•	
,	State	ZIP Co	de		
Contact phone	Email address				-
Bar number					
	State .				
	I, the attorney for the debtor(s) named in thi to proceed under Chapter 7, 11, 12, or 13 o available under each chapter for which the the notice required by 11 U.S.C. § 342(b) at knowledge after an inquiry that the information of the informa	Last Name  Case number (From C	Last Name  Last Name	Lest Name  Lest Name  Case number (Freewir)  Lite attorney for the debtor(s) named in this petition, declare that I have informed the to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have expandiable under each chapter for which the person is eligible. I also certify that I have of the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applie knowledge after an inquiry that the information in the schedules filled with the petition is Signature of Attorney for Debtor  Date  Signature of Attorney for Debtor  Number Street  City State ZIP Code  Email address  Bar number	Last Name  Last Name  Case number (Nametri).  Last Name  Last Name  Case number (Nametri).  Last Name  Last Name  Case number (Nametri).  Last Name  Last Name Informed in this pesition, declare that I have informed the debtor  Last Name Name Name Name  Last Name  Last Name  Last Name Informed in this pesition, declare that I have informed the debtor  Last Name Name Name Name  Last Name Informed in this pesition, declare that I have informed the debtor  Last Name Name Name Name Name  Last Name Informed in this pesition, declare that I have informed the debtor  Last Name Name Name Name Name Name Name Name

Ca	ase 17-25432	Doc 1	Filed 08/25/17 Document	Entered 08/25/17 10:18:15 Page 8 of 57	Desc Main
Debtor 1	THERESSA Farel Native Militable Native		DHNSON E Name	Case number (d (moun)	
bankrupi attorney	if you are filing this tcy without an e represented by	themse	ives successfully. Beci	dual, to represent yourself in bankruptcy court people find it extremely difficult to represe suse bankruptcy has long-term financial and by urged to hire a qualified attorney.	
an attorn	ley, you do not lie this page.	To be su technica dismisse hearing, firm if yo case, or	iccessful, you must correct, and a mistake or inaction to because you did not file or cooperate with the courur case is selected for audyou may lose protections,	thy file and handle your bankruptcy case. The rule is may affect your rights. For example, your case a required document, pay a fee on time, attend it, case trustee, U.S. trustee, bankruptcy administic. If that happens, you could lose your right to fil including the benefit of the automatic stay.	may be a meeting or strator, or audit de another
		in your so property also deny case, suc cases are	chedules. If you do not list or properly claim it as exer y you a discharge of all you th as destroying or hiding p a randomly audited to dete	debts in the schedules that you are required to fi ticular debt outside of your bankruptcy, you mus a debt, the debt may not be discharged, if you d mpt, you may not be able to keep the property. T ur debts if you do something dishonest in your be property, falsifying records, or lying. Individual ba rmine if debtors have been accurate, truthful, an me; you could be fined and imprisoned.	t list that debt to not list The judge can ankruptcy
		successfu Bankrupk	il, you must be familiar wit	ney, the court expects you to follow the rules as intreat you differently because you are filing for you have the United States Bankruptcy Code, the Federal rules of the court in which your case is filed. You laws that apply.	ourself. To be
		Are you a conseque	ware that filing for bankrup nces?	tcy is a serious action with long-term financial ar	nd legal
		Yes			
			ware that bankruptcy fraud or incomplete, you could	is a serious crime and that if your bankruptcy fo be fined or imprisoned?	rms are
		☐ No ☐ Yes			
				e who is not an attorney to help you fill out your t	pankruptcy forms?
		¥ Yes. Na Att	me of Person_ ach Banknuptcy Petition Pre	parer's Notice, Declaration, and Signature (Official	Fолп 119).
	×	attorney ma	with the properties of the property of the pro	understand the risks involved in filing without an and I am aware that filing a bankruptcy case withs or property if I do not properly handle the case.	AL

Signature of Debto

Contact phone

Cell phone

Email address

Date

Signature of Debtor 2

MM / DD / YYYY

Date

Contact phone

Cell phone

Email address

### Case 17-25432 Doc 1 Filed 08/25/17 Entered 08/25/17 10:18:15 Desc Main Document Page 9 of 57

Debtor 1	THERESSA	JOHN:	SON
	First Name	Middle Name	Last Name
Debtor 2			
Spouse, if this	IG) First Name	Microle Name	Last Name
Inited State	s Bankruptcy Court for the	e: Northern District of I	Ninois
ase numbe	ır.		
	(If known)		********

Check if this is an amended filing

### Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first: then complete the information on this form. If you are filing amended schedules after your

Particle Summarize Your Assets	
Schedule A/B: Property (Official Form 106A/B)	Your assets Value of what you own
1a. Copy line 55, Total real estate, from Schedule A/B	s0.00
1b. Copy line 62, Total personal property, from Schedule A/B	
1c. Copy line 63, Total of all property on Schedule A/B	s1,101.00
art 2: Summarize Your Liabilities	\$ 1,101,00
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	Your liabilities Amount you owe \$ 9,452.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ s 12,298.00
Your total liabilities	\$ 12,298.00
1935 Summarize Your Income and Expenses	L
Schedule I: Your Income (Official Form 1061) Copy your combined monthly income from line 12 of Schedule I	\$1,704.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$1,612.00
ial Form 106Sum  Summary of Your Assets and Liabilities and Certain Statistical Information	

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De	ebtor 1	THERES	SA Middle Name	JOHNSON Last Name	Case number (#known)	
P	an 4:	Answer Th	ese Question:	s for Administrative and S	itatistical Records	
6.	Are you	u filing for ba	nkruptcy under	Chapters 7, 11, or 13?		
	No.  Vi Yes	You have not	hing to report on	this part of the form. Check this	s box and submit this form to the court with your	other schedules.
7.	What kir	nd of debt do	you have?	inin di di kacamatan da kacamata Barangan da kacamatan da kacamat	an and a manager and a second control of the	······································
	You famil	r debts are p ly, or househo	rimarily consum old purpose." 11 t	er debts. Consumer debts are J.S.C. § 101(8). Fill out lines 8-	those "incurred by an individual primarily for a p 9g for statistical purposes. 28 U.S.C. § 159.	ersonal,
	☐ You	r debts are n	ot primarily con: Let with your othe	Sumer dehts. You have nothin	g to report on this part of the form. Check this bo	ox and submit
8.	Erana dh.	- Pdada-		et de mario sonserva de la companya	ere e en la companya de la companya	Standard Control of the Control of t
<b>ta</b> ,	Form 12	2A-1 Line 11;	OR, Form 122B	Monthly Income: Copy your to Line 11; OR, Form 122C-1 Line	tal current monthly income from Official 14.	\$2,272.00
		**			the state of the s	
9. (	Copy the	following sp	ecial categories	of claims from Part 4, line 6	of Schedule E/F:	
					Total claim	

From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	<b>s</b> 0.00
9b. Taxes and certain other debts you owe the government (Copy line 6b.)	s <u>1,894.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	s0.00
9d. Student loans. (Copy line 6f.)	\$0.00
<ol> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)</li> </ol>	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00
9g. Total. Add lines 9a through 9f.	s 1,894.00

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B 6 Summary (Official Form 6 - Summary) (12/14)

## UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re THERESSA JOHNSON  Debtor	Case No.
	Chapter 13

### SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	отнек
A - Rea Property			s		OTHER
B - Personal Property		10	\$11,010 <sup>co</sup>		
C - Property Claimed as Exempt		2			
D - Creditors Holding Secured Claims		3	West State	5 9452 co	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)				1894	
F - Creditors Holding Unsecured Monpriority Claims		7.		10. 40H	
G - Executory Contracts and Unexpired Leases		ĵ		7 704	
H - Codebtors		.1			
l - Current Income of Individual Debtor(s)		2			5
J - Current Expenditures of Individual Debtors(s)		3			1704
тот	AL	29	11.010.00	11346	1016

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B 6 Summary (Official Form 6 - Summary) (12/14)

Debtor

In re THERESSA

## UNITED STATES BANKRUPTCY COURT

Northern District of Illinois Case No. Chapter 13

# STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

□Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

**JOHNSON** 

Summarize the following types of liabilities, as reported in the Schedules, and total them.

	<del></del>	
Type of Liability	An	nount
Domestic Support Obligations (from Schedule E)	s	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$	1,894.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	s	0.00
Student Loan Obligations (from Schedule F)	s	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	s	0.00
TOTAL	s	1,894.00

State the following:

Average Income (from Schedule I, Line 12)	\$ 1704.00
Average Expenses (from Schedule J, Line 22)	\$ 1612
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	<sup>\$</sup> 2272.

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 0
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 1894	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		<b>\$</b>
4. Total from Schedule F		\$10 296 00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$14 100°

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Debtor 1	THERESSA		JOHNSON	
	First Name	MiddSe Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Miodie Name	Last Name	
United States I	Bankruptcy Court for th	e: Northern District of I	Minois	

Check if this is an amended filing

page 1

### Official Form 106A/B

## Schedule A/B: Property

12/15

in each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

No. Go to Part 2. Yes. Where is the property?	rest in any residence, building, land, or similar pr	operty?	
Street address, if available, or other description  City State ZIP Cod	What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check on	Do not deduct secured of the amount of any security amount of any security and the continuous who have classified the entire property?  S	ed claims on Schedule E ims Secured by Properly  Current value of t portion you own?  \$ of your ownership
County	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this	Check if this is co	ommunity property
ou own or have more than one, list here:	what is the property? Check all that apply.  Single-family home  Duplex or multi-unit building	Do not deduct secured cia the amount of any secured Creditors Who Have Clain	d cipime on Coboolide Co
Street address if available or other description			
Street address, if available, or other description	Condominium or cooperative  Manufactured or mobile home  Land	Current value of the entire property?	
Street address, if available, or other description  City State ZIP Code	Condominium or cooperative  Manufactured or mobile home	Current value of the entire property?  \$	Current value of the portion you own?  \$

Schedule A/B: Property

Filed 08/25/17 Doc 1 Entered 08/25/17 10:18:15 Page 14 of 57 Document THERESSA Debter 1 JOHNSON Case number (# Inchm)\_ What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Single-family home Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Current value of the Current value of the entire property? portion you own? Manufactured or mobile home Land investment property City State ZIP Code Timeshare Describe the nature of your ownership interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No W Yes **FORD** 3.1. Make: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put **ESCAPE** Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2008 Year Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? At least one of the debtors and another portion you own? Other information: 9,452.00 ☐ Check if this is community property (see

3.2. Make: \_\_\_\_\_

If you own or have more than one, describe here:

Who has an interest in the property? Check one.

Debtor 1 only

Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

instructions)

Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

Current value of the portion you own?

\$\_\_\_\_

Year:

Approximate mileage:

Other information:

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ebtor 1		JUHNSON		
	First Name Middle Name	Let Name Case number (	il knowni	
		1944		
3.3.	Make:	Who has an interest in the property? Check one.		daims or exemptions.
	Model:	Debtor 1 only	the amount of any secur Creditors Who Have Cla	ned claims on Schools
	Year:	Debtor 2 only		
	Approximate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	<ul> <li>Current value of portion you ow</li> </ul>
	Other information:	At least one of the debtors and another	······································	portion you ow
		Check if this is community property (see instructions)	\$	\$
3.4.	Make:	Who has an interest in the property? Check one.	Do not de tratant anno 1	
1	Model:	Dipositive of	Do not deduct secured of the amount of any secure	ed claims on Schoolule
		Debtor 2 only	Creditors Who Have Clair	ms Secured by Prope
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own
(	Other information:			
		Check if this is community property (see	\$	\$
		instructions)		
Vatero	craft, aircraft, motor homes. A	TVs and other recreational valueias other value	<b>-</b> -	
=xamp	iles: Boats, traiters, motors, pers	TVs and other recreational vehicles, other vehicles, and accessonal watercraft, fishing vessels, snowmobiles, motorcycle accesso	sories vies	
Natero Exampi I No I Yes	les: Boats, trailers, motors, pers	TVs and other recreational vehicles, other vehicles, and accessonal watercraft, fishing vessels, snowmobiles, motorcycle accesso	ssories vies	
<i>Examp.</i> ☑ No ☑ Yes	es: Boats, trailers, motors, pers	ional watercraft, fishing vessels, snowmobiles, motorcycle accesso	ries	
<i>Exampi</i> ☐ No ☐ Yes	vies: Boats, trailers, motors, pers	conal watercraft, fishing vessels, snowmobiles, motorcycle accesso  Who has an interest in the property? Check one.	Do not deduct secured daths amount of any secures	d claims on <i>Schedule</i> i
No Yes	vies: Boats, trailers, motors, pers s viake:	Who has an interest in the property? Check one.  Debtor 1 only	ries	d claims on Schedule i
Examp: No Yes  4.1. No	Make:  Model:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on <i>Schedula I</i>
Examp: No Yes  4.1. No	vies: Boats, trailers, motors, pers s viake:	Who has an interest in the property? Check one.  Debtor 1 only	Do not deduct secured cla the amount of any secure Creditors Who Have Claim	d claims on Schedule I ns Secured by Property Current value of
Examp: No Yes  4.1. No	Make:  Model:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule I ns Secured by Property Current value of
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You ov	Make:  Make:  Model:  Control  Model:  Model:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)	Do not deduct secured cla the amount of any secured Creditors Who Have Claim Current value of the entire property?	d claims on Schedule Ins Secured by Property  Current value of portion you own?
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Xampi No No Yes  4.1. N N Y O  you ov  yeu ov  A  M Ye	Make:  Model:  Cear:  Other information:  with or have more than one, list heliake:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  ere:  Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clain  Current value of the entire property?  \$	d claims on Schedule ns Secured by Propert  Current value of portion you own'  \$
Xampi No 12 Yes 1.1. N N Y O	Make:  Make:  Model:  Cother information:  who or have more than one, list he lake:  lodel:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  ere:  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clatte amount of any secure Creditors Who Have Claim  Current value of the entire property?  \$ Do not deduct secured claim the amount of any secured Creditors Who Have Claim  Current value of the entire property?	d claims on Schedule in Secured by Proper Current value of portion you own  \$ ms or exemptions. Puckains on Schedule is Secured by Property Current value of
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THERESSA

Debtor 1

JOHNSON

Case rember (# known)\_\_\_\_

Do	you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claim or exemptions.
	Household goods and furnishings	
	Examples: Major appliances, furniture, linens, china, kitchenware	
	□ No	
	Yes. Describe HOUSEHOLD FURNITURE	s 1,500.0
		\$1,500.0
	Electronics	
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	Mo No	
	Yes. Describe INCLUDED ONLINE 6	\$
	Collectibles of value	***************************************
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles  1 No	
	Yes. Describe	
		\$
9. E	equipment for sports and hobbies	
i	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	⊇ No	
Į	Yes. Describe	e
		\$
	irearms	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
_	☐ No ☐ Yes. Describe	
•	at Yes. Describe	\$
11. C	iothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
C	No	
	Yes. Describe	
		\$
12. <b>J</b> e	ewelry	
E	xamples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirioom jewelry, watches, gems,	
	gold, silver	
	l No	
Ĺ	Yes. Describe	\$
3. <b>N</b> (	on-farm animals	
	xamples: Dogs, cats, birds, horses	
	l No	
	Yes. Describe	
	ics. Despite	\$
4. Ar	ry other personal and household items you did not already list, including any health aids you did not list	
	No.	
٠	Yes. Give specific information	¢
		4
5. <b>A</b> (	id the dollar value of all of your entries from Part 3, including any entries for pages you have attached	4 500 50
	Part 3. Write that number here	\$1,500.00

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		Document Pa	ge 17 of 57	
Debtor 1	THERESSA First Name Mickie Name	JOHNSON Last Names	Case number (introdus)	
Part 4:	Describe Your Financial Asset	is		
Do you ow	n or have any legal or equitable in	terest in any of the following?		Current value of the portion you own? Do not deduct secured day or exemptions.
16. Cash				·
	es: Money you have in your wallet, in	your home, in a safe deposit box, a	nd on hand when you file your petition	
Ø No □ ves				
	***************************************	**************************************	Cash:	. \$
	s of money es: Checking savings or other finance	isi secounte: codificates of describ-	shares in credit unions, brokerage house:	
	and other similar institutions. If you	have multiple accounts with the sa	snares in credit unions, proxerage house: une institution, list each.	\$ <b>,</b>
□ No				
₩21 Yes	***************************************	Institution name:		
	17.1. Checking accoun	nt. FIFTH THIRD BANK	<u> </u>	<b>s</b> 51.00
	17.2. Checking account	mt		
	17.3. Savings account			\$
	17.4. Savings account			\$
	17.5. Certificates of de	eposit.		
	17.6. Other financial e			\$
	17.7. Other financial a	ccount	Principal designation of the state of the st	\$
	17.8. Other financial ad	ccount:		\$
	17.9. Other financial a	ccount:		\$
	nutual funds, or publicly traded sto s: Bond funds, investment accounts w		ecounte	
2 No	,	The state of the s	a de la constante de la consta	
🛚 Yes	Institution or issuer na	me:		
	**************************************			\$
	V			
19. Non-nuhi	lich traded stock and interests in in	renmorated and iminament of	ousinesses, including an interest in	
	,		-warresses, including an interest in	

M No

Yes. Give specific

information about

them.....

an LLC, partnership, and joint venture

Name of entity:

% of ownership:

0%

0%

0%

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**JOHNSON** 

**THERESSA** 

Debtor 1

rint Name	Middle Name	Last Name	· · · · · · · · · · · · · · · · · · ·
20. Government and con	porate bonds and	other negotiable and non-negotiable instruments	
Negotiable instruments	include personal c	Yerks cashiers' rhacks promiseon costan and manus and	
	nems are mose you	cannot transfer to someone by signing or delivering them.	
No Character	<b>!</b>		
Yes. Give specific information about	Issuer name:		
them			\$
			\$
	***************************************		<u> </u>
21. Retirement or pension	1 accou <del>nts</del>		
		401(k), 403(b), thrift savings accounts, or other pension or profit-shar	ino olans
☐ No		•	
Yes. List each account separately.	Type of account:	institution name:	
		ACAIZ	
	401(k) or similar pla	TOR	\$58.00
	Pension plan:		<u> </u>
	IRA:		\$
	Retirement account		
	Keogh:		
	Additional account:		
	Additional account:		
companies, or others	deposits you have with landlords, prep	made so that you may continue service or use from a company lid rent, public utilities (electric, gas, water), telecommunications	
2 No			
☐ Yes	ŧ	stitution name or individual:	
	Electric:	1976 9-11	\$
	Gas: _		<b></b> \$
	Heating oil:		\$
	Security deposit on re	miai unit	\$
	Prepaid rent:		<b></b> \$
	Telephone:		***************************************
	Water:		<u> </u>
	Rented furniture: Other:		\$
	Oliter.		<b>\$</b>
Annuition (A nontraction			
. Annumes (A contract for a	a penodic payment	of money to you, either for life or for a number of years)	
	leessee name and a		
	Issuer name and des	сярвоп:	
			<b>\$</b>
			\$ <b>\$</b>

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	Debtor 1	THERESSA	JOHNSON	0	
		First Name Micks	Name Last Name	Case number (if known)	
	24 Interes	s in an education IR	A in the apparent to a southern James		
	26 U.S.	C. §§ 530(b)(1), 529A	A, in an account in a qualified ABLE program, or th) and 529(b)/1)	under a qualified state tuition program	n.
	2 No		(o), and oxology ().		
	wat 165		Institution name and description. Separately file th	e records of any interests 11 U.S.C. 8 52	1/c)
			•	302	i(o).
					_ \$
			4114-4		
					- \$ <u></u>
					- \$
	E Tournin		A		
•	exercis	equivable or ruture in able for your benefit	terests in property (other than anything listed in	line 1), and rights or powers	
	Z No	,			
		_			
	₩ Yes.	Give specific			
	mor	mation about them			\$
2	6. Patents	copyrights, tradems	irks, trade secrets, and other intellectual propert	iy	
	Example	s: Internet domain nar	nes, websites, proceeds from royalties and licensing	agreements	
	2 No		-		
	Q Yes.	Give specific			
		nation about them			_
					\$
2	7. License	franchiese and att	ner general intangibles		
~	Example	s Building nermite av	riseira iranganan ananantis		
	-A	r. wonding permiss, ex	clusive licenses, cooperative association holdings, li	iquor licenses, professional licenses	
	☑ No				
		Give specific			
	mforr	nation about them			\$
					* · · · · · · · · · · · · · · · · · · ·
M	oney or p	operty owed to you?	•		
		_			Current value of the
					portion you own? Do not deduct secured
					claims or exemptions.
28		ds owed to you			
	2 No				
	Yes. 0	Sive specific informatio	so .		
	ā	bout them, including y	vhether	Federal:	\$
	3	ou already filed the re	tums	State:	5
	ā	nd the tax years	***************************************		
				Local:	\$
29	Family St				
	⊏xamples	Past due or lump sun	n alimony, spousal support, child support, maintenal	nce, divorce settlement, property settleme	ent
	2 No			is a feet of a second	··- <del>-</del>
	Yes. 6	ive specific informatio	n		
		,		Alimony:	•
				•	\$
				Maintenance:	\$
				Support:	\$
				Divorce settlement:	\$
				Property settlement.	\$
30	Other arm	unts someone owes	work		T
	Examples:	Unpaid wages, disabil	lity insurance narmonic disability bonafts side and		
		Social Security benefit	its; unpaid loans you made to someone else	, vecation pay, workers' compensation,	
	□ No	•			
		ve specific information			
		- ~ イトペンペット おりひくけんはほぼり	1		

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THERESSA JOHNSON Case number (# totale) . - - -31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Z No Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value: of each policy and list its value. 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. Z No Yes. Give specific information..... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue 2 No Yes. Describe each claim. 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims 2 No Yes. Describe each claim. 35. Any financial assets you did not already list ☐ Yes. Give specific information...... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here 58.00 Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. Part 5 37. Do you own or have any legal or equitable interest in any business-related property? 1 No. Go to Part 6. Q Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned 2 No Yes. Describe..... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, moderns, printiers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices 2 No Yes. Describe.....

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Debtor 1	THERESS/	V	JOHNSON	Case number (# known,	
	ery, fixtu <i>r</i> es, eq	uipment, supplies yo	u use in business, and tooks of	your trade	
Ø No					
☐ Yes.	Describe				. \$
44 4					
41. Inventor	У				
	Describe				
					\$
	in partnership	s or joint ventures			
₩ No	_				
Li Yes.	Describe	lame of entity:		% of ownership:	
	~			<u> </u>	\$
	-			%	\$
	-			*	\$
43. Custome	r lists, mailing	lists, or other complit	ations		
Ø No □ Va=	N				
yes. ا	uo your lests in: DNo	clude personally iden	ntifiable information (as defined	in 11 U.S.C. § 101(41A))?	
	Yes. Describ	е			
					\$
44 Any hueli	nateles-san	operty you did not alr	one made a fitting		
No.		operty you aid not as	bady ast		
	Sive specific				_
INFORM	ation —				\$
	Part .				\$
		· · · · · · · · · · · · · · · · · · ·			\$
					\$
					\$
					\$
45. Add the d	oliar value of a	il of your entries from	n Part 5, including any entries fo	or pages you have attached	s 0.00
ioi ran s.	, raine mest umi	loer nere	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	A bridge for near stratific	3
Sales Sa					
Part 6: D	escribe Any l	Farm- and Commer	cial Fishing-Related Prope	rty You Own or Heve an Interest i	·
11	you own or ha	ve an interest in farm	land, list it in Part 1.	3 ON IN 14546 SH THENESK!	in.
6. Do van aw	n or have and	AGA) of positivities in-	rest in any farm- or commercia		
Mo. Go	to Part 7.	ages or educative little	reat in any farin- of commercia	I fishing-related property?	
Yes. G	o to line 47.				
					Current value of the
					portion you own?
7. Farm anim	na be				Do not deduct secured claims or exemptions.
		y, farm-raised fish			
□ No	-,				
☐ Yes	~~~, ~~, ~, , , , , , , , , , , , , , ,				
					\$

Case 17-25432 Doc 1 Filed 08/25/17 Entered 08/25/17 10:18:15 Desc Main Page 22 of 57 Document THERESSA MARKET MARKET JOHNSON Debtor 1 Case number (# known) \_\_\_\_\_

	• • • • • • • • • • • • • • • • • • • •	
48. Crops-either growing or harvested		
D No		
Yes. Give specific		
information		\$
49. Farm and fishing equipment, implements, machinery, fi	ixtures and innie of sends	¥
LI NO	was some some of the second se	
☐ Yes		
		\$
50. Farm and fishing supplies, chemicals, and feed		***************************************
□ No		
☐ Yes		
		•
51. Any farm- and commercial fishing-related property you	did not almady liet	<u> </u>
U No	and the angular tot	
Yes. Give specific information		
anderengos.		\$
52. Add the dollar value of all of your entries from Part 6, in	cluding any entries for pages you have attached	
for Part 6. Write that number here		, \$
201174 Describe All Property Vey Own on Ma	we an Interest in That You Did Not List Above	
		3
53. Do you have other property of any kind you did not alrea	ady list?	
Examples: Season tickets, country club membership		
Yes. Give specific		
information		\$
		\$
		\$
54. Add the dollar value of all of your entries from Part 7, Write	ite that number here	\$ 0.00
		0.00
Paris: List the Yotols of Each Bart of this E-		
Cartes List the Totals of Each Part of this Fo	****	
55. Part 1: Total real estate, line 2		
		<b>\$</b>
56. Part 2: Total vehicles, line 5	\$ <u>9,452.00</u>	
57.Part 3: Total personal and household items, line 15	\$1,500.00	
58. Part 4: Total financial assets, line 36	s 58.00	
69. Part 5: Total business-related property, line 45	Samuel State Commission Commissio	
60.Part 6: Total farm- and fishing-related property, line 52	<b>\$</b>	
	Committee of the Commit	
it. Part 7: Total other property not listed, line 54	<b>4</b> \$	
52. Total personal property. Add lines 56 through 61.	s 11,010.00 Company	
	\$ 11,010.00 Copy personal properly total	+\$ 11,010.00
o ₩-a.b. o -u		
3. Total of all property on Schedule A/B. Add line 55 + line 62		s 11,010.00
3. Total of all property on Schedule A/B. Add line 55 + line 62		s11,010.00

Schedule A/B: Property

page 10

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	mation to identify your case			
		JOHNSON		
Debtor 2	The state of the s	me Last Name		
(Spouse, if filing) Fee	11000	Carlo (storie)		
Case number	kruptcy Court for the: Northern Di	SENCE OF HINOIS		
(if known)				Check if this is amended filing
				unicided lang
fficial For	m 106C			
chedu	le C: The Pro	perty You	Claim as Exemp	04/16
ace is needed, fi	And monda out ocheans was la	<i>7000my (Unicial Form 108</i>	ogether, both are equally responsible for A/B) as your source, list the property that Additional Page as necessary. On the top	
r each Item of p	property you claim as exemp	t, you must specify the	amount of the exemption you claim. O	ne way of doing so is to state a
any applicable	statutory limit. Some exemp	ly, you may claim the hi tions—such as those fo	I fair market value of the property being the state of the property being the property and the property of the	g exempted up to the amount
THE CHARGE LET TOTAL TOTAL	—way no miniminad ili dollar s	imolini. However, if vnii	Cizim an avamation of their of the	and the second s
sen our evenidad	on to a particular gollar amo o the applicable statutory an	wint and the value of the	property is determined to exceed that	amount, your exemption
artill Ident				
attern ment	ify the Property You Clai	m as Exempt		
Which set of c	exemptions are you claiming	? Check one only, even it	your spouse is filing with you.	
You are cla	aiming state and federal nonba	ankruptcy exemptions 11	U.S.C. § 522(b)(3)	
Wa You are ca	aiming federal exemptions. 11	U.S.C. § 522(b)(2)		
For any prope	rty you list on Schedule A/B	that you claim as exem	pt, fill in the information below.	
Brief descript Schedule A/B	ion of the property and line on that lists this property		Amount of the exemption you claim	Cronific insurables all and a
		housest Ann offili		absence mas mar snow exembition
		portion you own Copy the value from Schedule A/B	Check only one box for each exemption.	Specific laws that allow exemption
Brief	HOUSEHOLD	Copy the value from Schedule A/B	,	Shervic mas that given exclubited
Brief description: Line from		Copy the value from	□ \$ 1,500.00	эрөснис ыма глаг аном ехетрион
description:	HOUSEHOLD	Copy the value from Schedule A/B	,	Special mas that allow exemption
description: Line from Schedule A/B: Brief	15	Copy the value from Schedule A/B \$ 1,500.00	100% of fair market value, up to any applicable statutory limit	Special mas trial grow exemption
description: Line from Schedule A/B: Brief description: Line from		Copy the value from Schedule A/B	\$ 1,500.00  100% of fair market value, up to any applicable statutory limit  \$ 9,452.00  100% of fair market value, up to	Special mas the grow exemption
description: Line from Schedule A/B: Brief description: Line from Schedule A/B:	15	Copy the value from Schedule A/B \$ 1,500.00	100% of fair market value, up to any applicable statutory limit	эресин миз гля вном ехенирног
description: Line from Schedule A/B: Brief description: Line from	15	Copy the value from Schedule A/B \$ 1,500.00	\$ 1,500.00  100% of fair market value, up to any applicable statutory limit  \$ 9,452.00  100% of fair market value, up to any applicable statutory limit	эресин миз ша аком ехетрион
description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Brief	15	Copy the value from Schedule A/B \$ 1,500.00	\$ 1,500.00  100% of fair market value, up to any applicable statutory limit  \$ 9,452.00  100% of fair market value, up to any applicable statutory limit  \$	эресии миз ши виом ехенирной
description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B:	15 CAR 2008 FORD	Copy the value from Schedule A/B \$ 1,500.00 \$ 9,452.00	\$ 1,500.00  100% of fair market value, up to any applicable statutory limit  \$ 9,452.00  100% of fair market value, up to any applicable statutory limit	Special laws that allow exemption
description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Are you claimin	CAR 2008 FORD	Copy the value from Schedule A/B \$ 1,500.00 \$ 9,452.00 \$	\$ 1,500.00  100% of fair market value, up to any applicable statutory limit  \$ 9,452.00  100% of fair market value, up to any applicable statutory limit  \$	Special laws that allow exemption
description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Are you ctaimin (Subject to adjus	CAR 2008 FORD  og a homestead exemption of streent on 4/01/19 and every 3	Copy the value from Schedule A/B \$ 1,500.00 \$ 9,452.00 \$ wears after that for cases	\$ 1,500.00  100% of fair market value, up to any applicable statutory limit  \$ 9,452.00  100% of fair market value, up to any applicable statutory limit  \$	Special laws that allow exemption
description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Are you claiming (Subject to adjust No	CAR 2008 FORD  og a homestead exemption of streent on 4/01/19 and every 3	Copy the value from Schedule A/B \$ 1,500.00 \$ 9,452.00 \$ wears after that for cases	\$ 1,500.00  100% of fair market value, up to any applicable statutory limit  \$ 9,452.00  100% of fair market value, up to any applicable statutory limit  \$	Special laws that allow exemption

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Debtor 1

THERESSA

JOHNSON Last Name

Case number (if known)

	1400	1000
100		
	art	2

### Additional Page

Brief descrip on Schedule	tion of the property and line A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:		. \$	_ Qs	
Line from Schedule A/B:	-		100% of fair market value, up to any applicable statutory limit	
Brief description:	-	. \$	Os	
Line from Schedule A/B:		To the state of th	100% of fair market value, up to any applicable statutory limit	
Brief description:		s	. <b>O</b> s	-
Line from Schedule A/B:	errorius tumbospagijos		100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b>D</b> \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b>Q</b> s	
Line from Schedule A/B:	<del></del>		100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b>D</b> s	
Line from Schedule A/B:	· · · · · · · · · · · · · · · · · · ·		100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b>O</b> s	
Line from Schedule A/B:	-	**************************************	100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b>D</b> s	The second secon
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	D.	
Line from Schedule A/B:		V	100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b>D</b> s	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ s	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description: -		\$	<b>□s</b>	-
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	

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Fill in this information to identify your	Case).			
Debtor 1 114ERESA	NOENHOL			
Debtor 2	de Name Last Name			
-	de Name Last Name			
United States Bankruptcy Court for the: NORT	HEM District of ILLINDIS			
Case number (If known)			[] Chaol	cif this is an
				ded filing
Official Form 106D				
	rs Who Have Claims Secur	ed by Pro	nartu	40.14
Be as complete and accurate se possible	o. M. force was a North and the state of the			12/15
information. If more space is needed, co additional pages, write your name and c	e: It wo marned people are filing together, both are e by the Additional Page, fill it out, number the entries, ase number (if known)	qually responsible and attach it to thi	for supplying corre is form. On the top o	ct fany
	the state of the s		-	•
Do any creditors have claims secured     Ale Check his have claims.	by your property?			
Yes. Fill in all of the information below	orm to the court with your other schedules. You have noth	ing else to report or	this form.	
Co. F in at an Of the information bear	N.			
Part 11 List All Secured Claims				
2 First all proposed about 15		Column A	Column B	
o con odni. I noe hen me ment	more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2.	Amount of claim	Value of collateral	Column C Unsecured
As much as possible, list the claims in alt	phabetical order according to the creditor's name.	Do not deduct the value of collateral	that supports this claim	portion
2.1 HONOR FINANCE	December the manual state of	9250	9157	If any
Creditor's Name	Describe the property that secures the claim:		5 17 V	· ·
909 DAVIS STREET	2008 FORD ESCAPE			
Number Street	Arrivation and the second seco			
	As of the date you file, the claim is: Check all that apply.	-		
EVANSTON IL 60201	Contingent  U Unliquidated			
City State ZIP Code	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only				
Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax tien, mechanic's lien)		4	
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred 08/01/0201	Last 4 digits of account number 8 2 0 1			
	Describe the property that secures the claim:		ne programme de la companya de la c S	
	brokers mer secures me ciam:		ΨΨ	
Creditor's Name	and projectly that becames the claim:			
Craditor's Name  Number Street	properly that sections the cizim:			
	As of the date you file, the claim is: Check all that apply.			
Number Street	As of the date you file, the claim is: Check all that apply.			,
Number Street  City State ZiP Code	As of the date you file, the claim is: Check all that apply.			
Number Street  City State ZiP Code  Who owes the debt? Check one.	As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated			
Number Street  City State ZIP Code  Who owes the debt? Check one.  Debtor 1 only	As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured)			
Number Street  City State ZiP Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only	As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)			
Number Street  City State ZiP Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)			
Number Street  City State ZiP Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit			
Number Street  City State ZiP Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit			The second secon

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Document Page 26 of 57 THERESSA JOHNSON Debtor 1 Additional Page Column A Column B Column C Part 1: After listing any entries on this page, number them beginning with 2.3, followed Amount of claim Value of collateral Unsecured by 2.4, and so forth. Do not deduct the that supports this portion value of collateral claim Describe the property that secures the claim: Creditor's Name Number Share As of the date you file, the claim is: Check all that apply. ☐ Contingent City State ZIP Code ☐ Unliquidated Disputed Who owes the debt? Check one. Nature of Hen. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tex lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: Creditor's Name Number As of the date you file, the claim is: Check all that apply. Contingent ☐ Unliquidated State ZIP Code ☐ Disputed Who owes the debt? Check one. Nature of Hen. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only car loan) Debtor 1 and Debtor 2 only Statutory tien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: Creditor's Many Number Street As of the date you file, the claim is: Check all that apply. Contingent State 7IP Code ☐ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) Check if this claim relates to a community debt

Add the dollar value of your entries in Column A on this page. Write that number here: if this is the last page of your form, add the dollar value totals from all pages.

Last 4 digits of account number

Write that number here:

Official Form 106D

Date debt was incurred \_

Additional Page of Schedule 0: Creditors Who Have Claims Secured by Property

page 2 of 3

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THERESSA

Debtor 1

JOHNSON List Others to Be Notified for a Debt That You Aiready Listed Part 2: Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection Ose this page only if you have outers to the notined about your translations in one collection agency is trying to collect from you for a debt you ose to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number \_\_\_\_ Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number \_ Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number\_ Number City State ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number\_ Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number \_\_ Number Street City State ZIP Code

Case 17-25432 Doc 1 Filed 08/25/17 Entered 08/25/17 10:18:15 Desc Main Document Page 28 of 57 Fill in this information to identify your case. **THERESSA** Debtor 1 JOHNSON First Name Debtor 2 (Spouse, if filing) First Name United States Bankruptcy Court for the: Northern District of Illinois Case number Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Parish List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nonpriority amount ILLINOIS DEPT. REVENUE Last 4 digits of account number 1 5 2 5 s 249.00 s 249.00 s P O BOX 62726 When was the debt incurred? 12/30/2015 As of the date you file, the claim is: Check all that apply. SPRINGFIELD IL 62 IL 62726 Contingent Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were is the claim subject to offset? intoxicated **Ø** No Other, Specify Q Yes 2.2 Last 4 digits of account number  $\frac{1}{5}$   $\frac{5}{2}$   $\frac{5}{5}$   $\frac{1,645.00}{5}$   $\frac{1,645.00}{5}$ When was the debt incurred? 12/30/2015 P O BOX 64999 As of the date you file, the claim is: Check all that apply KANSAS CITY Contingent MO 64999 Untiquidated Who incurred the debt? Check one. O Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Domestic support obligations Debtor 1 and Debtor 2 only At least one of the debtors and another Taxes and certain other debts you owe the government Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated is the claim subject to offset? Other, Specify

Q No Q Yes

Entered 08/25/17 10:18:15 Desc Main Case 17-25432 Filed 08/25/17 Doc 1 Document Page 29 of 57 Debtor 1 Political Your PRIORITY Unsecured Claims — Continuation Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

············	The state of local	rotar ciarn	amount	Nonpriority amount
Priority Creditor's Name	Last 4 digits of account number	\$	\$	3
	When was the debt incurred?			
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	U Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the novemment			
Check if this claim is for a community debt	La Claims for death or personal injury while you were intoxicated			
Is the claim subject to offset?	Other. Specify			
□ No				
Transminutesia del compresso de la compressa d	and the state of t			
Priority Creditor's Name	Last 4 digits of account number	\$	هوه وجه زمار محالت مناسخت مناسخت	S
FIGHTY CHORDS S PERME		·	·	. 4
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
City State 719 Code	Contingent			
City State ZIP Code	Unfiquidated			
Who Incurred the debt? Check one.	Chisputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only				
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and cedain other debts you owe the government			
Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated Other. Specify			
is the claim subject to offset?	- Company			
□ No				
Yes				
Priority Creditor's Name	Last 4 digits of account number s	\$\$	erinare estados portar para por	
Number Street	When was the debt incurred?	· · · · · · · · · · · · · · · · · · ·		·
Street	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	U Uniquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor t only	Years of Pitterson			
Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you own the government			
Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated	ولو و بر السادة عن و بينام موسول الموسود و الموسود و الموسود و الموسود و الموسود و الموسود و الموسود	ترمناهات والمجاورة منت المحاودة المحاود	
	Other. Specify			commenced the state of the stat
s the claim subject to offset?				

☐ Yes

D	Case 17-25432  THERESSA First Name Mictale Name	Doc 1,	Filed 08/2 Docume	ent	Page 30 of 57	5/17 10:18:15	Desc	Main
P	Tariffi List All of Your NONE	RIORITY (	Insecured Cla	ims				
3.	Do any creditors have nonprior	ty unsecure	d claims against	VOU?				
	No. You have nothing to repor Yes	t in this part.	Submit this form	to the cou	rt with your other schedule:	<b>S</b> .		
4.	List all of your nonpriority unsec nonpriority unsecured claim, list the included in Part 1. If more than one claims fill out the Continuation Pag	e creditor bok	in the alphabeti arately for each o is a particular cla	ical order claim. For im, list the	of the creditor who holds each claim listed, identify v a other creditors in Part 3.if	s each claim. If a creditor what type of claim it is. Do you have more than three	r has more o not list cla e nonpriorit	than one ims already y unsecured
4.1	ASHRO			1 44	+ A stimitu at a a a a a a		Tota	l claim
	Nonpriority Creditor's Name				d 4 digits of account numb		\$	296.00
	PO Box 8951 Number Street	·····			en was the debt incurred?	02/01/2014		
	MADISON City	WI State	53708	Ac.	of the data see St. dis.			
			23 0122		of the date you file, the clai Contingent	m is: Check all that apply.		
	Who incurred the debt? Check one	<b>.</b> .			Conungent Unliquidated			
	Debtor 1 only Debtor 2 only				Disputed			
	Debtor 1 and Debtor 2 only			Trem				
	At least one of the debtors and and	other			e of NONPRIORITY unsec Student loans	tured claim:		
	Check if this claim is for a con	munity debt			Obligations arising out of a sep	Orahian agracus and and discount		
	is the claim subject to offset?	•			JIKK YOU GIO NOT DEDOM AS NAME	v claime		
	<b>2</b> No			<b>53</b> (	Debts to pension or profit-sharing Other. Specify CONSUME	ng plans, and other similar de ER CREDIT	itas	
	☐ Yes							
4.2	CAPITOL ONE BANK	aligne til gregorie for state for the state of the state	معاول المراوية	Last	4 digits of account number	territoria esta de la composito de la composit	and a last to the last to the group on the last to the group of the last to the last to the last to the last to	434.00
	Nonpriority Creditor's Name				n was the debt incurred?	07/01/2014	\$	734.00
	250 Rocketts Way,							
	RICHMOND	VA	23231	As o	f the date you file, the claim	in Charle all that and		
	City	State	ZIP Code		Contingent	the critical as that apply.		
	Who incurred the debt? Check one.				Intiquidated			
	Debtor 1 only Debtor 2 only			Q 0	isputed			
	Debtor 1 and Debtor 2 only			Туре	of NONPRIORITY LINSECL	red claim.		
	At least one of the debtors and anoth	her			ludent loans	and wateroom.		
	Check if this claim is for a comm	nunity debt		Qιο	bligations arising out of a senar	ration agreement or divorce		
	is the claim subject to offset?	•	•		at you did not report as priority abts to pension or profit-sharing	ciains		
	Ø No □ Yes			<b>5</b> 0	ther. Specify CONSUME	RCREDIT	tS	
<u></u>	والتقاعية والمناوات المناوات ا	المراجعة والمراجعة و	e para angumentang panggang kan manggang kan angung panggang ang angung kan angung kan angung kan ang angung k		WANTALINE CARROTT ALL TO THE PARTY OF THE PA		-	
4.3	CREDIT ONE			Last 4	digits of account number	التخوية والمستقدة والمستوي والمستقدة	<del>- Serverte Carles (1959) (1959)</del>	and the second of the second o
	Nonpriority Creditor's Name 585 E Pilot Rd					07/01/2015	\$	500.00
	Number Street			-				
	LAS VEGAS	NV State	89119	- Asofi	the date you file, the claim i	n Charles and		
	Who incurred the debt? Check one.	SIZE	ZIP Code		ntingent	s: Uneck all that apply.		
	Debtor 1 only				indigera iquidated			
ı	Debtor 2 only			D Dis	puted			
	Debtor 1 and Debtor 2 only  At least one of the debtors and another			Type	of NONPRIORITY unsecur	nel status.		
					dent loans	er ciam;		
	Check if this claim is for a comm	unity debt		🔲 оы	igations arising out of a congra	tion agreement or divorce		
	s the claim subject to offset? Z No			(Fich	you did not report as priority of its to pension or profit-sharing t	aims		
	2 Yes			₽ Oth	er. Specify <u>CONSUMER</u>	seus, and other similar debts CREDIT		
^e	F 100Fm							

Ø No □ Yes

At least one of the debtors and another

is the claim subject to offset?

Check if this claim is for a community debt

Student loans

Obligations arising out of a separation agreement or divorce that

Debts to pension or profit-sharing plans, and other similar debts

you did not report as priority claims

Other Specify CONSUMER CREDIT

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にんとうづち		_	_	_		
Name	Adulta Managa			=	 -	-

Part 3:	List	Others to	Se Notified	About a	Debt '	That	You.	Aiready	List
	_								

2, then list the collection agency here Similarly if you have	our bankruptcy, for a debt that you already listed in Parts 1 or 2. For of or a debt you owe to someone else, list the original creditor in Parts 1 or more than one creditor for any of the debts that you listed in Parts 1 or 2, list the to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one):  Part 1: Creditors with Principal Important Chair

Name				- A rest of the condition of the conditions
Number				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Clai
				Last 4 digits of account number
City		State	ZiP Code	
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
Number	Street			Line of (Check one): Q Part 1: Creditors with Priority Unsecured Claims
	SHEER		****	Claims Part 2: Creditors with Nonpriority Unsecured
City		State	Z3P Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
Number	Street			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
	Officer.			Claims Part 2: Creditors with Nonpriority Unsecured
City	. ,	State	ZIP Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
Number	Street		····	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
				Claims Part 2: Creditors with Nonpriority Unsecured
City		State	ZIP Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
Number	Street			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
··········	04600			Claims   Claims  Claims
City	والمنافذة	State	ZIP Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
Number	Street		······································	Line of (Check one):
	Older.	······································		Claims Part 2: Creditors with Nonpriority Unsecured
City	Park Salahatan S	State	ZiP Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
amber	Street			Line of (Check one): D Part 1: Creditors with Priority Unsecured Claims
<del></del>				Claims Part 2: Creditors with Nonpriority Unsecured
ity		State	ZIP Code	Last 4 digits of account number

De	Case 17-25432 C		Filed 08/25 on Pocumer		Entered 08/25/17 10:18:15 Des Page 33 of 57	sc Main		
P	Your NONPRIORITY Un	secured (	Claims — Contin	uatio	ı Page			
Al 4.	ter listing any entries on this page,	number th	em beginning will	14.4, f	ollowed by 4.5, and so forth.	Total claim		
4.5	SINAI HEALTH SYSTEM			1	ast 4 digits of account number 1 8 2 0			
	Nongenerity Creditor's Name 26460 NETWORK PLACE				Men was the debt incurred? 11/03/2015	<u>\$ 278.00</u>		
	Number Street CHICAGO	1L	60673		As of the date you file, the claim is: Check all that apply.			
	Who incurred the debt? Check one.  Debtor 1 only	State	ZIP Code	(	Contingent Unliquidated Disputed			
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	<del>दे</del> श		C	ype of NONPRIORITY unsecured claim:  2 Student loans			
	Check if this claim is for a community debt				J Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	Is the claim subject to offset?  No  Yes			i.	Debts to pension or profit-sharing plans, and other similar debts Other. Specify MEDICAL			
4	Victoria de la composición del composición de la composición de la composición de la composición del composición de la c							
d	UNIVERSITY OF ILLINOIS Nonpriority Creditor's Name 1801 W. TAYLOR				ast 4 digits of account number 7 4 4 8 then was the debt incurred?	\$ 9,680.00		
	Number Street							
	CHICAGO	IL	60612		s of the date you file, the claim is: Check all that apply.			
	•	State	ZIP Code		Contingent Unliquidated			
	Who incurred the debt? Check one.				Disputed			
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt				*			
					pe of NONPRIORITY unsecured claim:			
					Student loans  Obligations arising out of a separation agreement or divorce that			
					you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts			
	Is the claim subject to offset?			Ū	Other. Specify MEDICAL BILLS			
_	☐ No ☐ Yes							
اـ	The state of the s	***************************************	والمراجعة	Las	at 4 digits of account number	ar direction ( State or produced and produced and produced as a second as a second as a second as a second as a		
	Nonpriority Creditor's Name					· · · · · · · · · · · · · · · · · · ·		
	umber Street				en was the debt incurred?			
i	City	State	ZiP Code		of the date you file, the claim is: Check all that apply.			
	Am		Lii COGE		Contingent Untiquidated			
	Who incurred the debt? Check one.				Disputed:			
	Debtor 1 only Debtor 2 only				•			
	Debtor 1 and Debtor 2 only			_	e of NONPRIORITY unsecured claim:			
	At least one of the debtors and another			Student loans				
ξ	Check if this claim is for a community debt				Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	s the claim subject to offset?	,		<b>.</b>	Debts to pension or profit-sharing plans, and other similar debts			
	I No			W	Other, Specify			

Q Yes

JOHNSO

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

#### Total claim

#### **Total claims** from Part 1

- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- 6c. Claims for death or personal injury while you were intoxicated
- 6d. Other. Add all other priority unsecured claims. Write that amount here.
- 6e. Total. Add lines 6a through 6d.

- 00
- 00 6e.

#### Total claim

### Total claims from Part 2

- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

- 6f.
- 6g.
- 6h

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Debtor	THERESSA	JOHNSON	
	First Name	JUNNSUN  Middle Name Last Name	
Debtor 2 (Spouse if t	iling) First Name	Middle Name	
	stes Bankruptcy Court for the: No	CON IVELIE	
Case num		JAMESTI CASUICA OF INITIONS	
(if known)	Der	· · · · · · · · · · · · · · · · · · ·	Check if this is
··· · · · · · · · · · · · · · · · · ·	*		amended filing
`#6aia	J. France 4000		•
	Form 106G		
iche	dule G: Execu	Itory Contracts a	and Unexpired Leases 12/15
e as com	Diete and accurate as nose	ible & has married as a large	ing together, both are equally responsible for supplying correct ut, number the entries, and attach it to this page. On the top of any
VINo □ Ye Listse	Check this box and file this     Fill in all of the information	Delow even it the contracts or leas	schedules. You have nothing else to report on this form. es are listed on Schedule AB: Property (Official Form 106A/B).  contract or lease. Then state what each contract or lease is for (for some in the instruction booklet for more examples of executory contracts a
Persor	or company with whom y	ou have the contract or lease	State what the contract or lease is for
N/A			
Name			APPLICATION .
Number	Street		Managarana.
	Siropt		
City	State	ZIP Code	·
the transfer of	State	ZIP Code	
** *******	State	ZIP Code	
N/A	State	ZIP Code	
N/A Name Number			
N/A Name		ZIP Code	
N/A Name Number City	Street		
N/A Name Number	Street		
N/A Name Number City	Street		
N/A Name Number City	Street State Street	ZIF Code	
N/A Name Number City	Street State		
N/A Name Number City	Street State Street	ZIF Code	
N/A Name Number City Name City Name	Street State Street	ZIF Code	
N/A Name Number City Name Number City	Street State Street	ZIF Code	
N/A Name Number City Name City Name	Street State Street	ZIP Code	
N/A Name Number City Name Number City Name	Street State Street Street	ZIF Code	
N/A Name  Number  City  Name  City  Name  Number	Street State Street Street	ZIP Code	
N/A Name Number City Name Number City Name Number City Name	Street Street Street State	ZIP Code	
N/A Name Number City Name Number City Name Number City City	Street State Street Street	ZIP Code	

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F	ill in this information to i	dentify your case:			
c	ebtor 1 THERES	isa Johnson	M		
_	First Name	Mickie Name	Last Name		
	pouse, if filing) First Name	Widte Name	Last Name		
u	nited States Bankruptcy Court	for the: District of			
	ase number				
tı	(known)		-	Di Chara	V . L
				Check amend	
)	fficial Form 106	Н			
S	chedule H: Y	our Codebtors			
-				as complete and accurate as possible. If two mar	12/15
1.	Do you have any codebb  No Yes  Within the last 8 years, h Arizona, California, Idaho, No. Go to line 3.  Yes. Did your spouse, No Yes. In which come	ors? (If you are filing a joint case, lave you lived in a community p Louisiana, Nevada, New Mexico, former spouse, or legal equivalen	do not list either spouse a property state or territory? Puerto Rico, Texas, Wash at live with you at the time?	? (Community property states and territories include nington, and Wisconsin.)	<b>। व्यवस्थ</b>
	Number Street				
	unimer 20eer				
	City	State	ZIP Code		
1	n Column 1, list all of you	ir codebtors. Do not include you	ur spouse as a codebtor	if your spouse is filing with you. List the person	
;		106D), Schedule E/F (Official F		n your spouse is filing with you. List the person Riake sure you have listed the creditor on e G (Official Form 106G). Use Schedule D,	
	Column 1: Your codebtor			Column 2: The creditor to whom you owe th	
					e debt
7				Check all schedules that apply:	
,	Name			Schedule D, tine	
	Number Street			☐ Schedule E/F, line	
	Number Street			Schedule G, line	
3	City	State	ZIP Code		
Ì	Name		<del></del>	Schedule D, line	
				Schedule E/F, line	
	Number 2				
	Number Street			☐ Schedule G, line	
]	Number Street  City	State	ZIP Code	☐ Schedule G, line	
		State	ZIP Code	Schedule G, line	
		State	ZIP Code		:
	City	Stake	ZIP Code	O Schedule D, line	: : : : :
	City	Stake	ZIP Code	Schedule D, line	
	City	Stake Stake	ZIP Code	O Schedule D, line	

Official Form 106H

Schedule H: Your Codebtors

page 1 of \_\_\_\_

# 

Fill in this i	nformation to identi	fy your case;					
Debtor 1	THERESSA		JOHNSON	ı			
Debtor 2	First Name	Middle Name	Last Name				
(Spouse, if filing)	First Name .	Mickle Name	Last Name	<del></del> ]			
United States	Bankruptcy Court for the	: Northern District of Illinois					
Case number				į	Check it	f this is:	
(II KI (OWII)						mended filing	
				*	🔲 A su	pplement showing postpetition of	chapter 13
Official Fo	om 106l				incor	me as of the following date:	•
		ur Income			MM /	DD / YYYY	
		· · · · · · · · · · · · · · · · · · ·				tor 2), both are equally responsit	12/15
eparate shee	t to this form. On the	e top of any additional pag	jes, write your	name and case	number (if	tor 2), both are equally responsit you, include information about y cuse. If more space is needed, at known). Answer every question.	tach a
Fill in your information	employment n.		Debtor 1	*		Debtor 2 or non-filing spou	ea
If you have	more than one job, parate page with		>=====================================	**************************************		The state of the s	
information	about additional	Employment status	<b>2</b> Employed	đ		☐ Employed	
employers.			☐ Not empl	oyed		☐ Not employed	
self-employ	l-time, seasonal, or ed work.		OF OUR TOWN				
Occupation or homemal	may include student ker, if it applies.	Occupation	SECURITY				
		Employer's name	ALLIED BA	RTON			····
		Employer's address	161 WASH	INGTON STR	FFT		
			Number Street			Number Street	
			conshohock	en PA	19428		
			City	State ZIP Co		City State ZIP	Code
		How long employed there	7 10	_		10	
art 2: G	ive Details About	Monthly Income				And de statement and an analysis of the state of the stat	
			If you have not	ing to report for	arm line	ite \$0 in the space, Include your nor	
							i-tiling
below. If you	need more space, att	ve more than one employer, ach a separate sheet to this	combine the inf form.	ormation for all e	mployers to	r that person on the lines	
l int manthi				For De	ebtor 1	For Debtor 2 or non-filing spouse	
deductions).	y yrvaa wages, salar If not paid monthly, c	ry, and commissions (befo alculate what the monthly w	re ali payroli age would be.	2. s 2.2	72.00	*	
Estimate an	d list monthly overti	me pay.		3. +\$	0.00	+ \$	
Calculate gr	ross income. Add line	⊋ 2 + line 3.		4. \$ 2,2	72.00	\$	
				<u> </u>			

Official Form 1061

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Debtor 1	THERESSA JOHNSON First Name Middle Name Last Name		Case number (# Imp	<b>**</b> **********************************	
	•		For Debtor 1	For Debtor 2 or	
Copy	y line 4 here	. 🅕 4.	s 2,272.00	\$	•
5. List s	all payroll deductions:				•
5a.	Tax, Medicare, and Social Security deductions	5à	s 276.00	•	
5b.	Mandatory contributions for retirement plans	5b		\$ \$	
5c.	Voluntary contributions for retirement plans	5c	-	\$	
5d.	Required repayments of retirement fund loans	5d	: 232	\$	
<b>5e</b> . i	Insurance	5e.		\$	
<b>5</b> f. i	Domestic support obligations	5f.	\$	\$	
5g. (	Union dues	5g.	s 60.00	\$	
5h. (	Other deductions. Specify: 40 *1 C	5h.		+ \$	
6. Add	the payroli deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5f		:568	\$	
7. Calc	sulate total monthly take-home pay. Subtract line 6 from line 4.	7.	.1704	\$	
8. Lista	if other income regularly received:				
8a. N	Net income from rental property and from operating a business, profession, or farm				
n	Attach a statement for each property and business showing gross eceipts, ordinary and necessary business expenses, and the total northly net income.	8a.	\$0.00	<b>\$</b>	
8b. ii	nterest and dividends	8b.	s 0.00	•	
31	amily support payments that you, a non-filing spouse, or a depend egularly receive			* <u></u>	
S	nctude alimony, spousal support, child support, maintenance, divorce ettlement, and property settlement.	8c.	s0.00	\$	
	nemployment compensation	8d.	\$0.00	\$	
	ocial Security	8e.	\$0.00	\$	
in th N	ther government assistance that you regularly receive actude cash assistance and the value (if known) of any non-cash assistant at you receive, such as food stamps (benefits under the Supplemental utrition Assistance Program) or housing subsidies. pecify:		\$0.00		
	ension or retirement income	8f.		\$	
•		8g.	s 0.00	\$	
8h. <b>O</b> i	ther monthly income. Specify:	8h.	+\$0.00	+5	
	ll other Income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$0.00	\$	
10. Calcula Add the	ate monthly income. Add line 7 + line 9. e entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	s 1704 +	\$	· 1704
11. State a	ill other regular contributions to the expenses that you list in Sched	ı. Lule J.			
include friends	contributions from an unmarried partner, members of your household, y or relatives.	our de			
Do not i	include any amounts already included in lines 2-10 or amounts that are r	not ava	iliable to pay expenses	listed in Schedule J.	
Specify:				11. +	s0.00
12. Add the Write th	e amount in the last column of line 10 to the amount in line 11. The reat amount on the Summary of Your Assets and Liabilities and Certain St	esuit i atistica	s the combined monthly of Information, if it appli	y încome. es 12.	s.1704
₩A No.		m?			Combined monthly income
<b>↓</b> Yes	s. Explain:				

Debtor 1 THERESSA JOHNSON			
	1		
First Name Middle Name Last Name  Debtor 2	Check if this is:		
(Spouse, if filing) First Name Middle Name Last Name	An amended		An estate at the same
United States Bankruptcy Count for the: Northern District of Illinois	expenses as	nt snowing pos s of the followin	tpetition chapter 13
Case number (# known)	MM / DD / YY		
Official Form 106J	]		
Schedule J: Your Expenses			12/15
Se as complete and accurate as possible. If two married people are filing together, information. If more space is needed, attach another sheet to this form. On the top (if known). Answer every question.	both are equally respon of any additional pages.	sible for supply , write your nam	ring correct ne and case number
Part fi Bescribe Your Household			
1. Is this a joint case?			<u>.</u> .
Mo. Go to line 2.			
Yes. Does Debtor 2 live in a separate household?			
No			
☐ Yes. Debtor 2 must file Official Form 106.I-2, Expenses for Separate House	ehold of Debtor 2.	ore the manufacture operation represents the manufacture of the con-	and the second specific and the second specific and the second second second second second second second second
DO not list Debtor 1 and Li Yes. Fill out this information for Debtor 1 or D	relationship to lebtor 2	Dependent's	Does dependent live with you?
Debtor 2. each dependent		***************************************	□ No
names.			Yes
			□ No
			☐ Yes
- Particular de la companya de la co			☐ No ☐ Yes
			□ No
***************************************			Yes
			☐ No
3. Do your expenses include	***************************************	·	☐ Yes
expenses of people other than yourself and your dependents?			
Part 22 Estimate Your Ongoing Monthly Expenses			
Estimate your expenses as of your bankruptcy filing date unless you are using this fo	orm as a supplement in	a Charder 13 cs	es to mont
expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule</i> applicable date.	J, check the box at the	top of the form	and fill in the
include expenses paid for with non-cash government assistance if you know the valu	ne of		
such assistance and have included it on Schedule I: Your Income (Official Form 1061.	)	Your expen	ses
<ol> <li>The rental or home ownership expenses for your residence, include first mortgage pany rent for the ground or lot.</li> </ol>	payments and 4.	\$	650.00
If not included in line 4:			
4a. Real estate taxes	<b>4a</b> .	\$	0.00
4b. Property, homeowner's, or renter's insurance	4b.	\$	0.00
4c. Home maintenance, repair, and upkeep expenses	<b>4</b> c.	\$	0.00
4d. Homeowner's association or condominium dues	44.	\$	0.00
icial Form 106J Schedule J: Your Expenses			page 1

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Debtor 1 THERESSA JOHNSON Case number (# known)

			Your e	xpenses
5	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6	. Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	235.00
	6b. Water, sewer, garbage collection	6b.		
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.		0.00 50.00
	6d. Other. Specify:	6d.		30.00
7		7.		
8	Childcare and children's education costs		\$	
9	Clothing, laundry, and dry cleaning	8.		^^ ^^
10.	Personal care products and services	9.	\$	60.00
11.	Medical and dental expenses	10.		
12.		11.	\$	
	Do not include car payments.	12.	\$	75.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books			
14.	Charitable contributions and religious donations	13.		<del></del>
15.	Insurance.	14.	<b>\$</b>	
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	45-		
	15b. Health insurance	15a.		
	15c. Vehicle insurance	15b.		75.00
	15d. Other insurance. Specify:	15c.	\$	
		15d.	5	<del></del>
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Specify:	16.	\$	
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	317.00
	17b. Car payments for Vehicle 2	17b.		
	17c. Other. Specify:	17c.		
	17d. Other, Specify:	17d.	\$	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from	., .	~ <del></del>	**************************************
	your pay on line 5, Schedule I, Your Income (Official Form 1061).	18.	•	0.00
19.	Other payments you make to support others who do not live with you.		₽	0.00
	Specify:			
		19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	P <b>e</b> .		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

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(	Debtor 1	1 THE	RESSA me Middle Name	JOHNSON List Name	Case number (# loose)		
21	ı. Ott	her. Specify;	***************************************		<del></del> 21.	+\$	The state of the s
22	. Cal	iculate your	monthly expenses	<b>k</b>			
			through 21.	of far Daltas On Maria	22a.	\$	1,612.00
				es for Debtor 2), if any, from Official Form	: 106J-2 22b.	\$	0.00
	220	. Add ime 22	a and 22b. The resi	ult is your monthly expenses.	22c.	\$	1,612.00
23	. Calc	ulate your r	nonthly net incom	<b>).</b>			
	23a.	Copy line 1	12 (your combined n	nonthly income) from Schedule I.	<b>23a</b> .	<b>s</b>	1,704.00
	23b.	Сору уоиг	monthly expenses f	rom line 22c above.	<b>23b</b> .	-\$	1,612.00
	23c.			s from your monthly income.			20.00
		ine resulti	is your monthly net i	ncome.	23c.	<u> </u>	92.00
24.	Do ye	ou expect a	n increase or decn	ease in your expenses within the year	after you file this form?		
	For e	xample, do y	you expect to finish	paying for your car loan within the year or rease because of a modification to the te	do vou expect vour		
	Ø No □ Ye	D.	ain here:				

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an

ill in this information to identify your case:		
Debtor 1 Tensis Models Name Less N		
Debtor 2		
Spouse, if filing) First Name Middle Name East N	ame .	
United States Bankruptcy Court for the: District of	<del></del>	
t known)		1
		Check if this amended fil
Official Form 106Dec		
Declaration About an Indivi	dual Debtor's Schedules	12
If two married people are filing together, both are equally resp	profile for exampleing agreet information	
	es or amended schedules. Making a false statement, concealing	
Sign Below		
Did you pay or agree to pay someone who is NOT an attorn	ey to help you fill out bankruptcy forms?	
Did you pay or agree to pay someone who is NOT an attorn	ey to help you fill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice, Declaration Signature (Official Form 119).	, and
Did you pay or agree to pay someone who is NOT an attorn	Attach Bankruptcy Petition Preparer's Notice, Declaration	, and
Did you pay or agree to pay someone who is NOT an attorn	Attach Bankruptcy Petition Preparer's Notice, Declaration Signature (Official Form 119).	, and
Did you pay or agree to pay someone who is NOT an attorn No Yes. Name of person Under penalty of perjury, I declare that I have read the sums	Attach Bankruptcy Petition Preparer's Notice, Declaration Signature (Official Form 119).	, and
Did you pay or agree to pay someone who is NOT an attorn  No  Yes. Name of person  Under penalty of perjury, I declare that I have read the summer that they are true and correct.	Attach Bankruptcy Petition Preparer's Notice, Declaration Signature (Official Form 119).	, and
Did you pay or agree to pay someone who is NOT an attorn  No Yes. Name of person  Under penalty of perjury, I declare that I have read the summer that they are true and correct.	Attach Bankruptcy Petition Preparer's Notice, Declaration Signature (Official Form 119).  mary and schedules filed with this declaration and	, and

Fill in this	information to iden	tify your case:				
Debtor 1	THERESSA		JOHNSON			
Debtor 2	First Name	Middle Name	Last Name			
	ng) First Name	Middle Name	Last Name			
Case number	es Bankruptcy Court for t	ne: Normem Listnot (	of Hirtors			
(If known)			70.00	#		☐ Check if this is an
						amended filing
^e:_:_:	Fam. 407					
	Form 107					
					for Bankrupto	
O C S O S O S O S O S O S O S O S O S O	· u sinic ebene es sa	reveu, auxun a seus	rried people are filing rate sheet to this for	g together, both are equ m. On the top of any ed	ally responsible for suppl ditional pages, write your	ying correct
umber (if k	nown). Answer ever	y question.		ar on the top or any ad	unionai pages, write your	name and case
Part 1:	Give Details Abou	et Your Marital St	atus and Whore Y			
		va. maritar at	atus and missie i	on rived Retore		
1. What is	your current marita	l status?				
Man Man						
☐ Not	married					
	List all of the places	you lived in the last 3	years. Do not include Dates Debtor 1 lived there	where you live now.		Dates Debtor 2 lived there
				Same as Debtor 1		Same as Debtor 1
	633 S. LOOMIS		From 02-01-20	නි		From
7 454	anner ou eet		то 080-20	A Number Street		То
	HICAGO	IL 60636	-	**** *********************************		
Cit		State ZIP Code	-	City	State ZIP Code	
				Same as Debtor 1		Same as Debtor 1
			. From			
Nu	mber Street		To	Number Street		From To
			•			
Ch	1	State ZIP Code	-	City	State ZIP Code	
				•		
. Within th states an	ie last 8 years, did ye d territories include A	ou ever live with a sy rizona, California, Idal	pouse or legal equiva ho, Louisiana, Nevada	i <b>ient in a community pr</b> i, New Mexico, Puerto Ric	operty state or territory? (co, Texas, Washington, and	Community property
No						
₩ Yes. !	Make sure you fill out	Schedule H: Your Co	debtors (Official Form	106H).		
art 2: Ex	plain the Sources	of Your Income				

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1	Francisco Martin Name I no	JOHNSON	. Case n	umber (almoun)	
	First Name Middle Natno Las	l Name		Anadas di Assarana di Assarana da Assarana	
Filli If yo		ed from all jobs and all but	sinesses, including part-l	ime activities	lendar years?
₩.	Yes. Fill in the details.		SECTION OF STREET	2 - Printing and a state of the	
		Debtor 1		Oebior 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions) 1 1 3 G	Sources of Income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips  Operating a business	\$	Wages, commissions, bonuses, tips  Operating a business	\$
	For last calendar year:	Wages, commissions,	2007	Wages, commissions.	
	(January 1 to December 31,2016	bonuses, tips  Operating a business	30,455	bonuses, tips  Operating a business	\$
	For the calendar year before that:	Wages, commissions,	95	Wages, commissions,	
	(January 1 to December 31, 2015	bonuses, tips  Operating a business	<u>s 23,544.</u>	bonuses, tips Operating a business	\$
<b>52</b> N	••	ach source separately. D	o not include income the	t you listed in line 4.	
Y East	'es. Fill in the details.				
		Debtor 1		Delsor 2	
		Sources of Income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of Income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until		\$		\$
	the date you filed for bankruptcy:		\$		\$
	For last calendar year:	,	•		*
	(January 1 to December 31, 2016				\$
	•				\$
i	For the calendar year before that:				\$ <u></u>
(	(January 1 to December 31, 2015)				\$
	****		<b>.</b>		s

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Debtor 1	THERESSA First Name Middle Name	JOHN Lest Name	ISON	Cas	e number (# known)	
		rear istaire				
Part 3:	List Certain Payments	S You Made Befo	re You File	d for Bankruptcy		
÷ 4	han Dahita ata					
	her Debtor 1's or Debtor 2'					
CAI NO.	Neither Debtor 1 nor Deb "incurred by an individual p	headershing or header	нан, кантшу, от	nousenoid purpose,"		01(8) as
	During the 90 days before	you filed for bankru	ptcy, did you t	pay any creditor a total o	of \$6,425" or more?	
	No. Go to line 7.					
				f \$6,425* or more in one payments for domestic s ments to an attorney for	or more payments and the upport obligations, such as	
	* Subject to adjustment on	4/01/19 and every :	3 years after ti	nat for cases filed on or	this bankruptcy case. after the date of adjustment.	
<b>⊠</b> Yes	. Debtor 1 or Debtor 2 or b				or day about the	
	During the 90 days before	you filed for bankru	otcy, did you p	ay any creditor a total o	f \$600 or more?	
	No. Go to line 7.					
	Yes. List below each cr creditor. Do not in alimony. Also, do		COMPSEC SILVE	\$600 or more and the to port obligations, such as many for this bankrupicy ca	châld curana a and	
			Dates of payment	Total amount paid	Amount you still own	Was this payment for
	Creditor's Name	······································		\$	\$	☐ Mortgage
						O car
	Number Street					Credit card
						Loan repayment
						Suppliers or vendors
	City State	ZIP Code				Other
	Creditor's Name	·		\$	_ \$	☐ Mortgage
	Common a lawren					Car
	Number Street	······································	<del></del>			Credit card
						Loan repayment
						☐ Suppliers or vendors
	City State	ZIP Code				Other
	Creditor's Name	<del> </del>		\$	\$	☐ Mortgage
		***				Car
	Number Street					Credit card
						Loan repayment
	Cib.	-				Suppliers or vendors
	City State	ZIP Code				Other

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ebtor 1	THERESSA First Name Middle N	JOH Name Last Name	NSON		Case number (ranou	n)
agent, such a	rations of which you an , including one for a bu as child support and ali	isiness you operate as a imony.	relauves of an	y general partners;	partnerships of wh	who was an insider? ich you are a general partner; g securities; and any managing or domestic support obligations,
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
in	nsider's Name		-	\$	_ \$	
N	tumber Street		-			
ä			-			
ч	uy	State ZIP Code		\$	\$	
	sider's Name umber Street		***************************************	<u></u>	3	
ĈĀ,	У	State ZIP Code				
No		aranteed or cosigned by		ayments or transf	er any property or	account of a debt that benefited
			Dates of payment	Total amount paid	FOLKS.	Reason for this payment include creditor's name
insig	der's Name			\$	\$	
Num	nber Street		<del></del>			
City		State ZIP Code				
inside	er's Name		**************************************	\$	\$	
Num	ber Street		<del></del>			

8.

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Debtor 1	THERESSA JOI First Name Middle Name Cast Name	HNSON	Case number (# known)	
Part 4		ons, and Foreclosu	ros	
List a	in 1 year before you filed for bankruptcy, we all such matters, including personal injury cases contract disputes.	ere you a party in any	lawsuit court action or administrative	proceeding? s, support or custody modification:
<b>2</b>	•			
		ere of the case	Court or agency	Status of the case
1	Case title		Court Name	Pending
•	Case number		Number Street	On appeal Concluded
			City State ZIP Cod	le
(	Case title		Court Name	— Pending
-	Case number		Number Street	On appeal Concluded
			City State ZIP Code	
O No	n 1 year before you filed for bankruptcy, was call that apply and fill in the details below. D. Go to line 11.	s any of your property	repossessed, foreclosed, garnished, a	ttached, seized, or levied?
bodt Y∈	es. Fill in the information below.	Describe the proper	rty Date	Value of the property
	SANTANDER FINANCE	2011 FORD ES	SCAPE	s 9,452.00
	P O BOX 961245	Explain what happe	med.	
		Property was	repossessed.	
	FORT WORTH TX 76161 City State ZIP Code	Property was		
		Describe the proper	Control to the Control three three transports and the company of the Control to t	Value of the property
	Creditor's Name	**	****	<u> </u>
	Number Street	- Explain what happen	ned	
		Property was n		
	Otty State ZIP Code	. 🔲 Property was g		

Page 48 of 57 Document <sup>1</sup> **THERESSA** JOHNSON Debtor 1 Case number (# (moven)\_ 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? 2 No Yes. Fill in the details. Describe the action the creditor took Date action Amount was taken Number Street State ZIP Code Last 4 digits of account number: XXXX-\_\_\_\_ 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? M No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Ma No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts Person to Whom You Gave the Gift Number Street State ZIP Code Person's relationship to you \_\_\_ Gifts with a total value of more than \$600 Describe the gifts per person Dates you gave Value the gifts Person to Whom You Gave the Gift Number Street State ZIP Code Person's relationship to you \_\_\_

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	Fiest Name Middle Name	JOHNSON Last Marrie	Case n	umber (# known)	
hin	2 vears hainen von films fo	an bandanasa da b			
Νο	- Jens nevera you rate to	or bankruptcy, did you give a	ny gifts or contributions wit	h a total value of more than	\$600 to any charity?
NO	•				
re	s. Fill in the details for each	gift or contribution.			
Gi	ifis or contributions to charitie	S Describe what you	Contributed		
th	at total more than \$600	,	and a ser simple fifth fit.	Date you contributed	Value
Jan	rity's Name			***************************************	\$
					_
				<del></del>	\$
lumi	ber Street				
ity	State ZIP Code	<del></del>			
	List Certain Losses				
	VETURIN LDSSQS				
es. Des	Fill in the details.  cribe the property you lost any the loss occurred		ace coverage for the loss	Date of your	Value of property
es. Des	cribe the property you lost and		insurance has paid I interesting	loss insurance	Value of property lost
es. Des	cribe the property you lost and	include the amount the	at insurance has paid. List pending	loss insurance	Value of property lost
Des	cribe the property you lost and	include the amount the	at insurance has paid. List pending	loss insurance	Value of property lost
es. Des	ist Certain Payments o	Include the amount the claims on line 33 of Sc r Transfers Inkruptcy, did you or anyone	at insurance has paid. List pending chedule AB: Property.	insurance loss  pay or transfer any property	lost \$
es. Des now	ist Certain Payments o	Include the amount the claims on line 33 of Scottains	at insurance has paid. List pending chedule AB: Property.	insurance loss  pay or transfer any property	lost \$
es. Des now	ist Certain Payments o year before you filed for be sulted about seeking bankr ny attorneys, bankruptcy pet	Include the amount the claims on line 33 of Sc r Transfers Inkruptcy, did you or anyone	at insurance has paid. List pending chedule AB: Property.	insurance loss  pay or transfer any property	lost \$
es. Des now	ist Certain Payments o	Include the amount the claims on line 33 of Sc r Transfers Inkruptcy, did you or anyone	at insurance has paid. List pending chedule AB: Property.	insurance loss  pay or transfer any property	lost \$
es. Des now	ist Certain Payments o year before you filed for be sulted about seeking bankr ny attorneys, bankruptcy pet	Include the amount the claims on line 33 of So r Transfers ankruptcy, did you or anyone uptcy or preparing a bankrup tion preparers, or credit counse	at insurance has paid. List pending chedule AB: Property.	pay or transfer any property tuired in your bankruptcy.  Date payment or transfer was	lost \$
es. Des how	ist Certain Payments of year before you filed for be suited about seeking bankring attorneys, bankruptcy petition the details.	Include the amount the claims on line 33 of So F Transfers Inkruptcy, did you or anyone uptcy or preparing a bankrup ition preparers, or credit counse	at insurance has paid. List pending the dule ARS: Properly.  else acting on your behalf propertion? eling agencies for services rec	pay or transfer any property tuined in your bankruptcy.  Date payment or	\$
es. Des now	ist Certain Payments of year before you filed for be suited about seeking banking attorneys, bankruptcy petition the details.	Include the amount the claims on line 33 of So F Transfers Inkruptcy, did you or anyone uptcy or preparing a bankrup ition preparers, or credit counse	at insurance has paid. List pending the dule ARS: Properly.  else acting on your behalf propertion? eling agencies for services rec	pay or transfer any property tuired in your bankruptcy.  Date payment or transfer was	\$
es. Des now	ist Certain Payments of year before you filed for be suited about seeking bankring attorneys, bankruptcy petition the details.	Include the amount the claims on line 33 of So F Transfers Inkruptcy, did you or anyone uptcy or preparing a bankrup ition preparers, or credit counse	at insurance has paid. List pending the dule ARS: Properly.  else acting on your behalf propertion? eling agencies for services rec	pay or transfer any property tuired in your bankruptcy.  Date payment or transfer was	\$
es. Des Now	ist Certain Payments of year before you filed for be suited about seeking bankring attorneys, bankruptcy petition the details.	Include the amount the claims on line 33 of So F Transfers Inkruptcy, did you or anyone uptcy or preparing a bankrup ition preparers, or credit counse	at insurance has paid. List pending the dule ARS: Properly.  else acting on your behalf propertion? eling agencies for services rec	pay or transfer any property tuired in your bankruptcy.  Date payment or transfer was	\$
es. Des now	ist Certain Payments of year before you filed for be sulted about seeking bankruptcy petition the details.	Include the amount the claims on line 33 of \$6  F Transfers  Inkruptcy, did you or anyone uptcy or preparing a bankruption preparers, or credit counse to be considered to be co	at insurance has paid. List pending the dule ARS: Property.  Property.  else acting on your behalf propertion?  eling agencies for services rec	pay or transfer any property tuired in your bankruptcy.  Date payment or transfer was	\$
es. Des Town	ist Certain Payments of year before you filed for be sulted about seeking bankruptcy petition the details.	Include the amount the claims on line 33 of \$6  F Transfers  Inkruptcy, did you or anyone uptcy or preparing a bankruption preparers, or credit counse to be considered to the counse of	at insurance has paid. List pending the dule ARS: Property.  Property.  else acting on your behalf propertion?  eling agencies for services rec	pay or transfer any property tuired in your bankruptcy.  Date payment or transfer was	\$
L Tons	ist Certain Payments of year before you filed for be sulted about seeking bankruptcy petition the details.	Include the amount the claims on line 33 of \$6  F Transfers  Inkruptcy, did you or anyone uptcy or preparing a bankruption preparers, or credit counse to be considered to the counse of	at insurance has paid. List pending the dule ARS: Property.  Property.  else acting on your behalf propertion?  eling agencies for services rec	pay or transfer any property tuired in your bankruptcy.  Date payment or transfer was	\$
L Tons	ist Certain Payments o  year before you filed for be suffed about seeking bankruptcy petical in the details.  Who Was Paid  State ZIP C	Include the amount the claims on line 33 of \$6  F Transfers  Inkruptcy, did you or anyone uptcy or preparing a bankruption preparers, or credit counse to be considered to the counse of	at insurance has paid. List pending the dule ARS: Property.  Property.  else acting on your behalf propertion?  eling agencies for services rec	pay or transfer any property tuired in your bankruptcy.  Date payment or transfer was	\$

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Debtor 1	THERESSA First Name Middle Name	JOHNSON Last Name	Case number (#100mm)_		
		Description and value of any prop	Perty transferred	Date payment or transfer was made	Amount of payment
	Person Who Was Paid	_			
	Number Street			717	\$
		_			\$
	City State ZIP Code	-			
	Email or website address	•			
	Person Who Made the Payment, if Not You				
₩ N	mised to help you deal with your cred not include any payment or transfer that No /es. Fill in the details.	you listed on line 16.			
		Description and value of any proper	rty transferred	Date payment or transfer was	Amount of paymer
	Person Who Was Paid	•		made	
	Number Street	-		****	\$
		-			•
	City State ZIP Code			-	₹
Includ Do no	in 2 years before you filed for bankrup ferred in the ordinary course of your de both outright transfers and transfers not include gifts and transfers that you had o es. Fill in the details.	Nade as security (such as the country	se transfer any property to g of a security interest or mo	anyone, other than	a property erty).
		Description and value of property transferred	Describe any property or or debts paid in exchang	payments received	Date transfer was made
Ř	erson Who Received Transfer		**	ere e Araba ana ang ang ang	arab Miletty
No.	amber Street				
~			•		
Ci				******************************	
Pe	erson's relationship to you				
Pe	erson Who Received Transfer				
Nu	mber Street				
_					
City	y State ZIP Code				
Per	rson's relationship to you				

Case 17-25432 Doc 1 Entered 08/25/17 10:18:15 Desc Main Filed 08/25/17 Document Page 51 of 57 **THERESSA** Debtor 1 **JOHNSON** Case number (##rown)\_ 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) ☑ No Yes. Fill in the details. Description and value of the property transferred Date transfer Name of trust Part 8] List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. M No Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance before instrument closed, sold, moved, closing or transfer Of transferred Name of Financial Institution XXXX-\_\_\_\_\_ Checking O Savings Number Street Money market ☐ Brokerage City State ZIP Code Other\_\_\_ XXXX... Checking Name of Financial Institution Savings Money market ☐ Brokerage Other\_ 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Mo No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still

Name of Financial Institution

State

ZIP Code

Number Street

ZIP Code

have it?

Q Yes

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Debtor 1	THERESSA First Name Middle Name	JOHNSON Last Nation	Case number (#known)	
22. Have	e you stored property in a storage i	unit or place other than your home	within 1 year before you filed for bankruptcy?	
	No Yes. Fill in the details.	•	you need for meet for earningtey?	
; <del>-</del> '	ost the medic decise.	Without the section of the section o		
		Who else has or had access to	X? Describe the contents	Do you still have it?
	Name of Storage Facility	Name	Mind Advances to the second district the secon	□ No □ Yes
	Number Street	Number Street	**************************************	
		CityState ZiP Code		
	City State ZIP Code	MARINE.		
Part 9: 23. Do y	ou hold or control any property the	id er Control for Someone Ele- Il someone else owns? Include an	property you borrowed from, are storing for,	
orm EZIN			partition in the storing for,	
	es. Fill in the details.			
		Where is the property?	Describe the property	Value
i	Owner's Name	<del>-</del>		<b>\$</b> _
i	Number Street	Number Sheet	The second secon	
	City State ZIP Code	City State	2P Code	
Part 10:	Give Detells About Environ	imental information		\$
For the p	urpose of Part 10, the following de	finitions apply:		
<ul> <li>Envin</li> <li>hazan</li> <li>includ</li> </ul>	onmental law means any federal, st dous or toxic substances, wastes, ling statutes or regulations control	ate, or local statute or regulation of or material into the air, land, soil, silling the classics of these substates.	concerning pollution, contamination, releases of surface water, groundwater, or other medium,	
s Site m	leans any location, facility, or prop	Priv as defined under supplicit	es, wastes, or material. nental law, whether you now own, operate, or	
		A community of Suitable Mills"	ardous waste, hazardous substance, toxic	
Report all	notices, releases, and proceeding	s that you know about, regardless	of when they occurred	
4. Has an	y governmental unit notified you th	ist vou may be liable or notantiall.	liable under or in violation of an environmental law	
₩ No	•	y and the second potentially	mappe under or in violation of an environmental law	?
	s. Fill in the details.			
		Governmental unit		
		oosennana una	Environmental law, if you know it Dat	e of notice
Man	÷ of site			
Maka	er or eas	Governmental unit	_	710°2
Name	ber Street	Number Street		
-		City State ZIP Code		
City	State ZIP Code			

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		JOHNSON	O	
	First Name Middle Name	Lest Name	Case number (# (# (# Oours)	
Have	you notified any governmental us	nit of any release of hazardous mate	vial?	
₩ N	o			
Q y	es. Fill in the details.			
		Governmental unit	Environmental law, if you know it	<u>.</u>
			THE PARTY OF THE P	Date of notice
:	taure of site			
•	anne et 195	Governmental unit	···	·
i	fumber Street	Number Street	_	
~		City State ZIP Code	-	
ä	ity State ZIP Code	-		
lave ;	ou been a party in any judicial or	administrative proceeding under ar	ry environmental law? Include settleme	
KI NO	•			eus and orders.
⊒ Ye	s. Fill in the details.			
		Court or agency	•••	DA
_		and an addition	Nature of the case	Status of the case
Ca	se title	-		
		Court Name	Production A	Pending
				On appeal
		Number Street	<del></del>	Concluded
Cas	e number			
		City State ZIP Con	le T	
	Give Details About Your B	usiness or Connections to Any	Business	
Vithin	4 years before you filed for bankr A sole proprietor or self-employe	uptcy, did you own a business or he	ive any of the following connections to	any business?
/itthin	4 years before you filed for bankr A sole proprietor or self-employed A member of a limited liability con	usiness or Connections to Any uptcy, did you own a business or he d in a trade, profession, or other act mpany (LLC) or limited liability partr	ive any of the following connections to	any business?
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Case 17-25432 Doc 1 Filed 08/25/17 Entered 08/25/17 10:18:15 Desc Main Document Page 54 of 57

Describe the nature of the business:    Describe the nature of the business:	Debtor 1	THERESSA	JOHNSON	
Business Name   Business Name   Bit   Bit		First Name Mictile Name Le		Case number (#/xxxxs)
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Name of accountant or bookkeeper    Date business existed			Describe the nature of the business	
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Date issued    Sign Below   State ZP Code   From		Number Street		
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Declaration, and Signature (Official Form 119).	<b>—</b> 1€	- ivenile of person		Attach the Bankruptcy Petition Preparer's Notice
				Declaration, and Signature (Official Form 119).

B ID (Official Form 1, Exhibit D) (12/09)

#### UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re THERESSA JOHNSON	Case No.
Debtor	(if known)

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days before the filing of my bankruptcy case, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- I 2. Within the 180 days before the filing of my bankruptcy case, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.

B 1D (Official Form 1, Exb. D) (12/09) - Cont.

Page 2

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of:	[Check the
applicable statement.] [Must be accompanied by a motion for determination by	the court.]

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of menta
illness or mental deficiency so as to be incapable of realizing and making rational
decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: HULDSC Johnson

Date: 8 25-14

Case 17-25432 Doc 1 Filed 08/25/17 Entered 08/25/17 10:18:15 Desc Main

B6 Declaration (Official Form 6 - Declaration) (12/07)

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IR IT THERESSA JOHNSON

Case No.	· · · · · · · · · · · · · · · · · · ·
	(if known)

## **DECLARATION CONCERNING DEBTOR'S SCHEDULES**

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read to my knowledge, information, and belief.	he foregoing summary and schedules, consisting of 29 sheets, and that they are true and correct to the best of
Date 3-25-17	Signatur Therese Debtor
Date	Signature:
	(Joint Debtor, if any)
	[If joint case, both spouses must sign.]
DECLARATION AND SIGNATU	RE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)
promulgated pursuant to 11 U.S.C. 6 110(h) setting a maxim	Picy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have been must be for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum or or accepting any fee from the debtor, as required by that section.
Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer	Social Security No. (Required by 11 U.S.C. § 110.)
lf the bankruptcy petition preparer is not an individual, state who signs this document.	e the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner
Address	
Signature of Bankruptcy Petrition Preparer	THE PROPERTY OF THE PROPERTY O
	Date
	who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:
f more than one person prepared this document, attach addi	itional signed sheets conforming to the appropriate Official Form for each person.
bankruptcy pesition preparer's failure to comply with the provist 8 U.S.C. § 156.	ions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110;
DECLARATION UNDER PENAL	TY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP
I, the fthe	president or other officer or an authorized agent of the corporation or a member or an authorized agent of the
artnership ] of the	[corporation or partnership] named as debtor in this case, declare under negative of persons that I have
rad the foregoing summary and schedules, consisting of nowledge, information, and belief.	[corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have sheets (Total shown on summary page plus I), and that they are true and correct to the best of my
ate	
	Signature:
	[Print or type name of individual signing on behalf of debtor.]
n individual signing on behalf of a partnership or corpo	ration must indicate position or relationship to debtor.]
	ty: Fine of up to \$500,000 or imprisonment for up to 5 years or both 18 H S C 88 152 and 1571